

February 22, 2012

Good afternoon Representative Fleishman, Senator Stillman and members of the Education Committee,

Thank you for the opportunity to speak to you today concerning Senate Bill 24, *An Act Concerning Educational Competitiveness*. My name is Ann Nelson. I am a member of the Keep the Promise Coalition Children's Committee, NAMI-CT and a parent of a school aged child, Allie, living with mental illness- specifically anxiety and attention deficit hyperactive disorder (ADHD). In addition to her mental health challenges, Allie has also been the target of bullying- an experience far more common to children living with mental health issues. I am here today to not only advocate on behalf of Allie, but also for the more than 100,000 children living in Connecticut who have a diagnosable emotional-behavioral disorder. Most of these children could and would be successful in school if they receive early identification and treatment of their mental health disorders.

I would like to continue my testimony by sharing my daughter's story, as it is one that offers hope to all children if they receive the necessary support of school and community mental health providers. Allie's successful outcome was not based upon expensive school-based interventions or costly out of district placement, but upon a creative team of dedicated school professionals who had a commitment and passion to ensure that Allie flourished during her middle school years. Let me share with you some of the interventions that significantly reduced Allie's anxiety and enabled her to attend school. Most of these are evidence-based and extremely cost effective that all schools can incorporate:

- Identify one school personnel with whom Allie felt a connection and safe (this could have a paraprofessional, a teacher or even a janitor). Allie's confidant was Frank Henderson, the school principal. Allie knew that he "had her back" and kept an eye on her throughout the day.
- Designate a safe place in the building where Allie could go to take a break from school noise, chaos and possible bullying. This was the school psychologist's office- whether she was in the office or not.
- Select a peer of Allie's choosing who would be in the bulk of Allie's classes.
- Identify Allie's strengths- academically, socially and recreational- and focus on building these assets.
- Collaborate with Allie's family, therapist, pediatrician and psychiatrist, ensuring an integrated approach among home and school supports.
- Involve Madison Youth Services as a bridge between school and home.

Allie's team at Polson Middle School- principal, social worker, school psychologist, special education teacher, homeroom teacher and peers- became her cheerleaders and strongest advocates. Through their diversity of expertise and wisdom, they devised a plan that transformed Allie from acutely school phobic and fleeing school grounds to a child eager to climb onto a bus headed to Polson Middle school each morning.

Unfortunately, Allie is not the norm. Only 20% of children living with emotional-behavioral disorders can reliably access mental health care, resulting in about 90,000 Connecticut school children with untreated mental health conditions. Such problems present significant barriers to learning which all too often lead to academic failure, absenteeism, dropping out of high school and even possible suicide. Untreated and inadequately treated mental illness in children

can impose very large burdens on our state, as many of these kids end up in more expensive institutionalized settings including residential facilities, psychiatric hospitals and juvenile detention.

As legislators, you have the capacity to significantly change these statistics. My daughter and the other 99,000 Connecticut children with mental health needs ask the following of you:

- Provide professional development opportunities to train classroom teachers, administrators, school resource officers, and other key school professionals to recognize the signs of early onset mental health disorders. NAMI-CT has an evidence-based program, *Parents and Teachers as Allies*, which offers such a curriculum.
- Provide incentives for school-community collaboration in the delivery of mental health services so that our most vulnerable children do not fall between the systems' cracks.
- Restore the funds to School Based Mental Health Centers that were cut from the Department of Public Health's budget. Children who have access to school-based health centers have shown an improvement in school attendance as well as grade point average (GPA).

Thank you for the chance to share my experience. May we follow through on our mutual vision of leaving no child left behind.

With hope,

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